

DOCUMENT RESUME

ED 143 911

CG 011 679

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TITLE Gerontology: An Annotated Bibliography and Supplement.
INSTITUTION City Univ. of New York, N.Y. Center for Advanced Study in Education.
REPORT NO CASE-08-75; CASE-33-76
PUB DATE Aug 76
NOTE 88p.
EDRS PRICE MF-\$0.83 HC-\$4.67 Plus Postage.
DESCRIPTORS Adult Development; Annotated Bibliographies; *Gerontology; *Older Adults; *Psychological Characteristics; Research Projects; *Retirement; Senior Citizens; Social Sciences; *Sociocultural Patterns

ABSTRACT

This annotated bibliography deals with many aspects of gerontology. In addition to a group of general works, there are sections on psychological characteristics, intervention, education, work and retirement, services, and living situations. Annotations are quite detailed, often listing findings of studies and summarizing the author's main arguments. (BP)

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GERONTOLOGY
An Annotated Bibliography

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(Under the Direction of Lawrence Kilian)

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Report No. CASE-08-75
September, 1975

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GERONTOLOGY

- I General
- II Psychological Characteristics
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 - Variables influencing aging
- III Intervention
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- V Work and Retirement
 - Psychological factors
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 - Factors to consider in program implementation
- VI Services
 - Long-term care or residence facilities
 - Intervention
 - Day care, community centers, etc.
- VII Living Situations

I. GENERAL

Cerritos College, Survey of senior citizens. September, 1974. (ERIC Document Reproduction Service No. ED 097 062)

A questionnaire was devised and administered to members of the Golden Key Club about what matters they considered important and what was necessary in developing a new senior program. Some key responses about what is important are: (percentages are of total responses) hobby and recreational subjects, 18.5%; health-related subjects, 14.5%; community and world affairs, 11.6%. Family life ranked 8th, new job training 9th, 2nd academic courses 12th. As for what was most desired in a new program, four areas drew greater response than any others: coping better with daily problems, 23.8%; social development, 17.8%; retirement preparation, 15.4%; training for voluntary and community services, 14.3%.

Cummin, E., and Henry, W. E. Growing old: The process of disengagement. New York: Basic Books, 1961.

This lengthy book outlines a new theory of aging, a theory filling a void. Based on work from the Kansas City Study of Adult Life (a project funded by the National Institute of Mental Health), the results, claim the researchers, apply to all societies. Briefly, disengagement theory holds that "aging is an inevitable mutual withdrawal or disengagement, resulting in decreased interaction between the aging person and others in the social system he belongs to." The theory has greatly affected planners and has been the subject of much criticism, especially by proponents of the activity theory.

Cumming, E., Dean, L. R., Newell, D. S., & McCaffrey, I. Disengagement - A tentative theory of aging. *Sociometry*, 1960, 23. 23-25.

Palmore, E. B. Sociological aspects of aging. In E. W. Busse and E. Pfeiffer (Eds.), Behavior and adaptation in late life. Boston: Little, Brown, & Co., 1969.

Culture and society play at least as important a role in determining the roles of the elderly as biological processes. In this youth-oriented society, psychological problems in the aged, such as depression and paranoia, are often caused by deprivation of basic satisfactions, reduction to inferior status, and discrimination. In primitive and agricultural societies, the aged were important, but industrialized societies place lessening importance on them. As a minority group, the aged suffer from many negative stereotypes, among which are: illness (only 4% are in homes and bed-confining illnesses are not as widespread as commonly thought); mental abilities (speed may decline, but accuracy does not, and decline in intelligence scores are mostly artifacts); morale (some studies show the aged are not appreciably different from others); activities (the aged can be active and actually spend less time with mass media than those in their twenties); productivity (a 1956 survey showed older workers with 20% better attendance and fewer disabling activities). Not much is known about the voluntariness and effects of age segregation in housing. Evidence from a Duke longitudinal study shows disengagement from society is not inevitable and that level of activity is often dictated by past life-style. Current federal programs for the elderly include Foster Grandparent Project, Project FIND, and Project Green Thumb.

Reiner, M. L. Aging - What does it mean? Journal of Rehabilitation, 1974, 40, 14-15; 42; 44.

Aging is a cultural, psychological, and biological process; unfortunately, American society has set a predominantly chronological determinant for it. The author feels there is a contradiction in American philosophy: a work ethic exists where those with the most effort and talent are rewarded, but there is also mandatory retirement that eliminates people from the work force. Learning ability in the aged is associated with anxiety, motivation, and ability to perceive complex stimuli; learning can be done at any age if capabilities are always exercised, so life-long education is advisable. Rehabilitation counseling services for the aged should be aimed at preserving bodily functions and mental faculties, encouraging self-expression, and seeking opportunities for involvement to contribute to society.

II. PSYCHOLOGICAL CHARACTERISTICS

Anderson, N. N. Effects of institutionalization on self-esteem. Journal of Gerontology, 1967, 22, 313-317.

See section VI.

Bell, T. The relationship between social involvement and feeling old among residents in homes for the aged. Journal of Gerontology, 1967, 22, 17-22.

Feeling old does not necessarily follow from being old; the results of disengagement - lack of membership in intimate groups and poor psychological health - relate more to feeling old, claims the author. Subjects in this study were asked questions about their formal, informal, and family social involvement, and also whether they felt themselves to be old. In all three categories, low social involvement correlated with feeling old, and high social involvement correlated with not feeling old. The author mentions that feeling old is part of the total process of disengagement, and the most influential component is continued family involvement.

Botwinick, J. Cautiousness with advanced age. Journal of Gerontology, 1966, 21, 347-353.

Botwinick, J., and Storandt, M.. Vocabulary ability in later life.
Journal of Genetic Psychology, 1974, 125, 303-308.

There has been a generalization passed around that verbal functions are resistant to age while psychomotor skills are not; quantitative scoring of tests underscores such a generalization, showing no decrement in ability and sometimes even an increment. However, qualitative scoring (i.e., making differentiations among correct responses) may show a decrement and that is what this study sought to prove. Old and young subjects were compared on both quantitative WAIS vocabulary scores and on qualitative scores. The latter were determined by using a six-point scale from "superior synonym" down to "totally incorrect." Results show that younger adults more frequently gave superior synonym responses and less often gave poor explanations, while the older group made more errors of omission than commission, and was more reluctant to guess. The authors feel this study casts doubt on the thought that vocabulary functions are maintained throughout life; however, it does not indicate any cause (e.g., maturation of culture), and they suggest a longitudinal study for further research.

Botwinick, J., and Storandt, M. Cardiovascular status, depressive affect, and other factors in reaction time. Journal of Gerontology, 1974, 29, 543-548.

This study concerns reaction times where no choice is involved, just a response to a stimulus. Some interesting results were uncovered. For example, there was no significant difference in reaction time for elderly men and women, although old adults of low education were significantly slower than those of higher education. A definite slowing of reaction time with old age was found in the result that showed that older subjects were slower than younger ones of the same socioeconomic status. In terms of cardiovascular status and depressive affect, slower times were found across all ages. In perhaps the most interesting and unexpected result, exercise was shown not to have a significant effect on the aged's reaction times. Quicker reaction time was found only for younger adults who exercise, thus suggesting that physical exercise may not quicken reactions in the aged.

Brantner, J. Viewpoint: Many individuals can recover from old age. Geriatrics, 1969, 24, 48-56.

The author feels that old age is a matter of attitude: if a person is depressed because of loneliness or illness, he is likely to deteriorate quickly mentally and physically, whereas those leading active lives are rarely old psychologically. Rehabilitation therapy can reverse depression (both by physical and psychological means). The best way to prepare for old age is to think about it and get the mind ready; this is often hard in a youth-oriented society. Perhaps if euthanasia were available as an alternative (even if not used), some anxiety might be relieved simply by knowing there is an alternative to pain and suffering.

Ehrlich, I. F. Lifestyles among persons 70 years and older in age-segregated housing. The Gerontologist, 1972, 12, 27-31.

See Section VII

Fillenbaum, G. G. and Maddox, G. L. Work after retirement: An investigation into some psychologically relevant variables. The Gerontologist, 1974, 14, 418-424.

See Section V

Fisher, J., and Pierce, R. C. Dimensions of intellectual functioning in the aged. Journal of Gerontology, 1967, 22, 166-173.

Believing that the WAIS may not have the same meanings for the aged as for the young and thus may be inadequate, the authors sought to identify dimensions of behavior conceptually appropriate for and empirically relevant to the assessment of intellectual functioning in the aged. A battery of tests was administered three times across two years to two large samples, and a complete factor analysis was done. Three dimensions were found to be highly relevant in assessing intellectual functioning in the aged: intellectual functioning, cognitive accessibility, and social accessibility. Some variables in each dimension include thought quality and memory in intellectual functioning, rapport and cooperation in social accessibility, and consciousness and idea association in cognitive accessibility. One other dimension that was important, though not as stable as the others is dysphoria/depression (e.g. confusion and easy upset).

Friedman, H. Memory organization in the aged. Journal of Genetic Psychology, 1966, 109, 3-8.

Hutchison, S.L. An investigation of learning under two types of social reinforcers in young and elderly adults. International Journal of Aging and Human Development, 1974, 5, 181-186.

This study aims at determining success in learning among elderly adults under two basic methods of verbal feedback, praise and reproof. The results are generally surprising. Regardless of age group, all subjects made fewer errors when a correct answer was reinforced favorably and an incorrect answer not responded to. The elderly performed equally well under praise, reproof, and a neutral control, but younger adults were better on control and poorer on both praise and reproof conditions. The author suggests that, in light of these results, much more research is necessary on the relationship of social influences and teaching the elderly.

Jarvik, L. F., Kallman, F. J., and Falek, A. Intellectual changes in aged twins. Journal of Gerontology, 1962, 17, 289-294.

The present study gives longitudinal data for 134 twin pairs over age 60, all of whom were in good health, white, literate, English-speaking, and residing in the community. A battery of tests was administered on three occasions. On the first retest after one year, scores generally increased, while seven years later there was a slight decline. The authors comment that in longitudinal psychometric studies there should be a minimum of 2 retests of a naive adult population. Through complete factor analysis, the authors were able to discern no great, inherent intellectual deficit. Higher scores correlated positively with survival, and the authors comment that it is important to examine the relationship between mental fitness and survival. In addition, the authors surmise there may be a biological and genetic basis to psychological changes.

Kastenbaum, R. On the meaning of time in later life. Journal of Genetic Psychology, 1966, 109, 9-25.

This paper discusses attitudes toward time in the minds of old people. Those who have not prepared themselves psychologically for old age may come to experience an identity crisis. Referring to the common term, "living in the past," Kastenbaum claims that the old often spend much of their time in life review, preparing for death. Sometimes the young cannot understand the elderly's preoccupation with the past, and this may contribute to the separation of generations. Some, like Jung, say preparation for death is the major task of aging, but there is conflicting evidence on the importance of time in this regard. Some studies find a majority of very old people still have significant future ambitions, while Beck (1965) says the aged lose interest in time because it is associated with death. Interestingly, the author cites Fink (1957) as finding that those living in institutions are more concerned with the past than those living at home and have less concern for the future; Fink conjectures that the institutionalized might react to some negative qualities of the institution which distort the normal temporal orientation changes with age.

Katz, M. M. The effects of aging on the verbal control of motor behavior.
International Journal of Aging and Human Development, 1974, 5, 141-155.

This interesting paper deals with the ability of elderly people to exercise verbal self-control over their physical movements. Two groups of ages 65-75 and 80-96 were tested and compared to children. These questions were important: 1) What happens to self-control in later life? 2) At what ages do changes (if any) occur? 3) How does verbal control of behavior in elderly compare with that in children? 4) What factors account for individual differences in elderly? There have been many theories as to what may happen to self-control; for example, some say regression occurs, others say there is physiological deterioration, while learning theory predicts strength and resistance to decay. Results here show that verbal control becomes strong at age 5 and continues to age 80 where there may be a small decline in some people. Marked decline normally does not begin until age 90. Such decline in verbal control may coincide with failure to control one's bladder, and a possible explanation is the deterioration of self-control cells (Luria, 1966, found these cells to be in the frontal lobe, which is usually the first to deteriorate). The results cast more doubt on disengagement theory (that withdrawal from society and activity by the elderly is inevitable) since many of the old were still quite active. Other findings in this study indicate that weakened central nervous systems may lead to unnecessary motor behavior. Since the study implies that there is little verbal decline to age 90, the author suggests a revision of rules such as mandatory retirement ages, and he suggests that social inactivity and lack of meaningful pursuits can contribute to a decline in verbal control of behavior. He sees the need for more research on the elderly's reactions to changing and stressful situations.

Kuypers, J.A. Ego functioning in old age: Early adult life antecedents. International Journal of Aging and Human Development, 1974, 5, 157-179.

This study sought to determine influences of early adult life on aging; more specifically, questions here involve also what aspects of early adulthood have an impact on late adulthood. The subjects were interviewed in a longitudinal study over the course of 40 years. Three types of behavior are described: 1) coping behavior, which is flexible and self-adaptive; 2) defensive behavior, which is compelled and rigid; and 3) disorganized behavior. Results generally support Erikson's predictions that the failure of intimacy in early adulthood forecast poor ego development in old age. For example, some antecedents leading to good coping ability in old age are high intellectual capacity, high mental alertness, high speed of mental process, accurate use of language, high socioeconomic status, poise, cheerfulness, openness to discussion. One antecedent to defensive behavior in old age is low marital compatibility (mostly for women).

Labouvie-Vief, G., Hoyer, W. J., Baltes, M. M., and Baltes, P. B. Operant analysis of intellectual behavior in old age. Human Development, 1974, 17, 259-272.

Current evidence casts doubt on whether intellectual decline is continuous and irreversible. Reduced performance may just result from an inhibiting environment. The authors propose an operant framework as a model for guiding research and suggest such research should be directed at the range of modifiability of performance levels. Poor cognitive performance may be a function of lack of appropriate reinforcers, and long-range reinforcers (such as reputation and education) may not work because of shortened life expectancy. Most important, society may systematically withdraw reinforcers from an older person. From an operant view, aging implies an abrupt cessation of reinforcers for mastery-type behaviors, resulting in an age-correlated extinction of those behaviors. The authors propose research on methods and schedules of reinforcement, and also age differences in response to reinforcement.

Marriott, C. Environmental events and the timing of death. 1974.
ERIC Document Reproduction Service No. ED 098 472.

There is evidence that the timing of death may not be random: Phillips (1970) showed there were fewer deaths preceding birthdays and more right after; Marriott and Harshbarger (1973) showed a jump in death rate after Christmas. Perhaps it is possible to intervene during these death peaks; for example, the aging process possibly could be retarded by providing environmental enrichment (e.g. adequate community support). There should be alternatives to total institutionalization and total independence. The most important aspect of intervention with the elderly is to increase their inclusion into society and make them feel useful, an area where nursing homes and other institutions have generally failed.

Marriott, C. and Harshbarger, D. The hollow holiday: Christmas, a time of death in Appalachia. Omega, 1973, 4, 259-266.

Meichenbaum, D. Self-instructional strategy training: A cognitive prothesis for the aged. Human Development, 1974, 17, 273-280.

See Section III

Palmore, E. B. The effects of aging on activities and attitudes.
The Gerontologist, 1968, 8, 259-263.

This longitudinal study at Duke relates to the following questions:

1) Does aging reduce activities and attitudes? 2) Do decreases in activities mean decreases in satisfaction? (Disengagement theory states that high satisfaction stems from accepting the "inevitable" reduction in interaction while activity theory says that a reduction in activity implies a reduction in satisfaction.) 3) Is there a persistence of life style in aging? Men had almost no overall reduction in attitudes or activities, while women had a small but significant reduction. While the aged may disengage in some areas (such as retiring), they may increase in others (as in contact with friends). The author suggests that the healthy aged, who made up most of his sample, may maintain stable levels of activity. A positive correlation between activity and satisfaction was found, and life styles tend to persist into old age. The results generally support activity theory and reject disengagement. The author states that people should maintain middle-aged activities as long as possible and then find substitutes.

Palmore, E. B., and Stone, V. Predictors of longevity: A follow-up of the aged in Chapel Hill. The Gerontologist, 1973, 13, 88-90.

In this longitudinal study, the experimenters were attempting to find significant predictors of the longevity of man. Four significant predictors were uncovered: mobility, education, occupation, and employment (which was not as highly significant as the other three). In light of the common assumption that superior mental ability and high socioeconomic status seem to be predictors of longevity, the authors feel that, since those two factors often contribute to higher occupational levels and educational status, they are also probably important predictors. The authors define high education in terms of knowledge about health care, nutrition, etc.; high occupation in terms of safe and healthy work conditions, more income for health care, etc.; and high mental ability as better problem-solving ability and adaptation to crisis. One possible chain describing the dynamics of the increase in longevity is mentioned: the psychological and social rewards of high-status occupations, for example, lead to more life satisfaction, better mental health, and prevention of psychosomatically dangerous effects of depression and alienation. Interestingly, variables for which no significant relationship with longevity was found included marital status, number of children, and hearing ability.

Phillips, D. P. Dying as a form of social behavior. (Doctoral dissertation, Princeton University, 1970, No. 70-19, 799.)

Rubin, K. H. The relationship between spatial and communicative egocentrism in children and young and old adults. Journal of Genetic Psychology, 1974, 125, 295-301.

The expressed purpose of this study was to provide information regarding the development of and relationship between spatial and communicative egocentrism; thus, it concerned various kinds of perspective taking. In this cross-sectional study, spatial egocentrism was recorded by presenting stimuli to the subject and asking him to reproduce them from the experimenter's point of view. Communicative egocentrism was determined by asking the subject to describe the nonsense figure on each of ten cards so that the experimenter, in another room, might be able to match the description with the proper card in his identical set. The results generally oppose Piaget's notion of irreversibility: aged subjects were poorer than college-age ones, who were superior to second-grade ones and equal to sixth-grade ones. Results also show the possibility of structural disintegration in the elderly, though this contention is thus far entirely speculative. The author suggests the need for further analysis of the inter-relationships between Piagetian "decentration" tasks (e.g., conservation) across the life span.

Savage, R. D., Britton, P.G., George, S., O'Connor, D., and Hall, E. H.
A developmental investigation of intellectual functioning in the
community aged. *Journal of Genetic Psychology*, 1972, 121, 163-167.

The pattern of decline of intellectual functions is exaggerated by cross-sectional studies (Jarvik et al., 1962; Eisdorfer, 1963). The research of Riegel et al. (1967) on drop out rates in longitudinal studies supports the contention that some contradictory data in literature may be caused by attempts to generalize findings across excessive age ranges. The results of the present study, consisting of a series of WAIS subtests across time on a random community sample, differs from previous findings: there is a decline with advanced age on verbal and performance subtests. A possible explanation might be distortions in the range of IQ's in various studies. Studies of high-IQ subjects (e.g., Jarvick et al.) show less decline, while those of lower-IQ subjects (e.g., Berkowitz & Green, 1963) show more decline. This sample has a medium decline with a random sample.

Schaie, K. W. Translations in gerontology: From lab to life: Intellectual functioning. *American Psychologist*, 1974, 29, 802-807.

Schonfield, D. Translations in gerontology: From lab to life: Utilizing information. American Psychologist, 1974, 29, 796-801.

There seems to be a decrement with age in the ability to ignore irrelevant information (Rabbitt, 1965); this was found at age 65, but may begin at 45. Similarly, the aged generally have difficulty sticking to the point in conversations because of irrelevant memories. Thus, if an activity requires great concentration, special procedures are needed to avoid distraction. It is necessary to convey an unhurried impression with the elderly because of their slowness of comprehension.

Sparks, P. M. Behavioral versus experiential aging: Implications for aging. The Gerontologist, 1973, 13, 15-18.

The goal and focus of gerontology seems to be on a more chronological attitude toward aging rather than an experiential attitude. Aging can be eliminated, or at least forestalled, by dealing with experiential aging. An example of behavioral aging, which relates to chronological influences, is the loss of one's job. Experiential aging would emphasize not specific events but the quality of contact between the person and his environment. The author contends that the qualities most desired in life are functions of experiential aging, which in turn is generally a function of choice. Since experiential aging can be taught, it is reversible and controllable. Thus, the author states that if we focus on the quality of living rather than the number of years lived, the aged would be healthier. For example, old people who engage in many physically demanding activities successfully are those who have chosen the time in which they live and have not been bound by any outside, arbitrary dictates.

Taub, H. A. Coding for short-term memory as a function of age.
Journal of Genetic Psychology, 1974, 125, 309-314.

Many recent studies have shown an age-related deficit in both storage and retrieval in memory, but studies of the efficiency of coding as a function of age have been inconclusive. This study sought to shed light on the concept of chunking as a coding strategy. There were six sequences of twelve letters each, three being difficult to code (low-code) and three, with the same letters as the others, arranged to allow coding in three four-letter words (high-code). Subjects were in one of three age-groups: 19-29, 42-60, and 61-78. A significant difference was found between low- and high-code conditions in all groups; however, there was no difference between ages in the low-code condition, while in the high-code, old subjects did significantly worse than the others. Results from experiments into free recall suggest that the aged can and do code for storage but have trouble coding specific sequential orders. The author suggests more research on whether the observed deficit in coding by the aged is due to an inability to organize material or a failure to perceive that such organization is possible.

Tramer, R. T., and Schludermann, E. H. Cognitive differentiation in a geriatric population. Perceptual and Motor Skills, 1974, 39, 1071-1075.

The authors attempt in this paper to find correlations between the field dependence cognitive style and development in the aged. Their specific goals were to find the relation between field dependence, intellectual ability, and involvement in social relationships in a geriatric population. The results should have great bearing on the vulnerability and social adjustment of the elderly, since the differentiation hypothesis would predict that field-dependent elderly would have greater need of social contacts; however, one normally begins to lose one's old friends and relatives in old age. Results in the field dependence x intellectual ability category find a .58 positive correlation similar to Witkin's finding for younger age groups, while in the field dependence x socializing category there was a smaller (.22) but still positive correlation. The authors, finding the results unexpected, conclude that the differentiation hypothesis needs more investigation.

III. INTERVENTION

For articles concerning intervention programs in long-term care or residence facilities, see VI.

Baltes, P. B. Introduction to strategies for psychological intervention in old age: A symposium. The Gerontologist, 1973, 13, 4-6.

The purpose of the symposium is to turn away from lamenting old age and concentrate on explaining and modifying aging phenomena by behavioral principles. To have a good intervention strategy, one must cite the parameters of the task. The author cites examples: goals (e.g., alleviation, prevention); target behavior (e.g., cognition, social interactions, attitudes); setting (e.g., laboratory, classroom, hospital); mechanism (e.g., training/practice, social learning, psychotherapy, environmental change).

Kastenbaum, R. Perspectives on the development and modification of behavior in the aged: A developmental-field perspective. The Gerontologist, 1968, 8, 280-283.

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Keller, J. F. and Croake, J. W. Effects of a program in rational thinking on anxieties in older persons. Journal of Counseling Psychology, 1975, 22, 54-57.

The basis for irrational fears of growing old is a negative, unjust stereotyping of the aged; this study seeks to determine the extent to which old people themselves contribute to these negative feelings. The experimenters used a rational-emotive therapy model, assuming that thinking produces emotion (anxiety is rooted in irrational thinking) and cognitions are amenable to reason. Therapy is supposed to replace negative attitudes with logical thinking which should reduce anxiety; indeed, short-term education with these techniques did succeed in this purpose, and the evidence shows that anxiety has a grounding in the aging person's irrational thinking process.

Labouvie, G. V. Implications of geropsychological theories for intervention: The challenge for the seventies. The Gerontologist, 1973, 13, 10-14.

Conventional research has sidestepped major goals: explanation and prediction. Research must be subjected to causal analysis by experimental manipulation if it is to be of substantive value. One of the major obstacles to be removed in moving to refine efforts at explanation and modification of aging phenomena is the conviction that biological causes are the only real causes of aging and that modification must take place on the biological scene. Psychological factors must be promoted, and research is necessary to explore environmental and experiential factors in producing aged behavior. For instance, the findings of significant cohort differences in various properties shows little justification for assuming a behavioral deficit in the aged; rather, it suggests that behavior is continually monitored by the environment. It has become apparent that age-performance functions possess little generality, but require elaborate and detailed breakdown into specific parameters. It is now necessary to analyze the functional interdependence between environment and behavior change. The author's most urgent suggestions for further research lie not in the area of social action but of hard research. One possibility is a close analysis of stimulation lacks in the environment in order to determine what needs to be manipulated and modified.

Looft, W. R. Reflections on intervention in old age: Motives, goals, assumptions. The Gerontologist, 1973, 13. 6-10.

The author believes that society's recent turn to interventionism reflects its high valuation of cognitive and intellectual ability: it is so important that society tries to "uplift" people. Since the United States is an age-graded society, the differences between cohorts are as great as those between races. This age-stratification is undesirable, so a major effort should be directed to breaking down the barriers between cohorts. Citing studies showing that orphan infants removed from stifling institutions showed large gains in intellectual and social competence, the author wonders if the same can be done for the aged and nursing homes can be eliminated.

Marriott, C. Environmental events and the timing of death, 1974.
(ERIC Document Reproduction Service No. ED 098 472)

See Section II

Meichenbaum, D. Self-instructional strategy training: A cognitive prosthesis for the aged. Human Development, 1974, 17, 273-280.

There are many factors that contribute to the problem-solving deficit in the elderly: problem-solving is noted for the redundancy of information-seeking behavior, indicating failing memory; thus, a re-education in heuristic principles is necessary. Also, there is commonly an emission of task-irrelevant thoughts and/or negative self-statements; thus, it is necessary to train the elderly to talk themselves into a positive frame of mind. External support that would aid problem-solving includes instructions without time limits, memory aids as reminders, and prior practice in verbalizing the principles of the task. It seems that the chief difficulty in problem-solving is an inability to apply a good solution strategy (set of heuristic principles). The author suggests using a self-instructional treatment program that has been successful for children. Basically, this calls for imitation and then verbalization by the aged person; gradually, he achieves functional interiorization and is taught to self-instruct through a shaping process. Such verbalization rehearsal may facilitate concept behavior, can help to organize information and generate alternatives, can help to evaluate feedback, and can facilitate short-term memory by easing memory burden.

Based on results from child research, this program can enhance positive task orientation and help cope with failure.

Schaie, K.W. Translations in gerontology: From lab to life: Intellectual functioning. *American Psychologist*, 1974, 29, 802-807.

Intellectual decline with age is a myth; it has more to do with generational differences than with ontogenetic change. When it occurs, intellectual decline is often a precursor to physical decline. The author suggests researching the individual's microenvironment to understand individual differences better - this is a new field. Old people are more cautious, often performing less well on tasks because they're afraid of embarrassment. The author claims it is necessary to have cohort-appropriate assessment devices. For social policy, one should focus on cultural exposure, not retirement (which shouldn't be mandatory) and hobbies. It is also necessary to recognize sensory-motor deficits and accommodate for them, as in large-type reading materials and learning devices designed for slower response. The author predicts that maintenance of cognitive functions is significantly affected by the complexity of the surroundings.

Sunderland, J.T. Older Americans and the arts. John F. Kennedy Center for the Performing Arts, Washington, D.C.; National Council on the Aging, Inc., Washington, D.C., 1973. (ERIC Reproduction Document Service No. ED 081 689.)

One out of every ten Americans is now over 65; Morris estimates that by the year 2000, about 1/4 of the life expectancy will become "free time." The author holds that a national effort must be made to enrich the quality of old people's lives and to stimulate new social uses of the arts. Many current programs are cited, most of which are affiliated with community senior centers and involve some sort of active encouragement of the aged into practical music, dance, art, and drama, or at least encourage the aged to be audiences. One particularly interesting and successful program is in teacher training for the elderly at the Maryland Institute College of Art. Here, people over 60 are trained in arts and crafts and go back into the community to teach such skills to other old people or young people. Another good program is the Everyman Project which brings together the young and old in a performing theater setting to develop a sense of mutual concern. The

article lists several suggestions for implementation of programs at the community level, and it emphasizes the need to continue to give existence meaning in old age.

IV. EDUCATION

Birren, J. E., and Woodruff, D. S. A life-span perspective for education.
NYU Education Quarterly, 1973, 4, 25-31.

Education should be not only for productive skills but also for providing a broader basis for orientation toward the psychological, social and cultural aspects of one's life. Greater participation in life-span education could mean better relations between generations. Techniques to reverse observed age changes in performance on cognitive tasks are in the experimental stage. Before deriving programs, it would be a good idea to examine early childhood intervention programs, and perhaps better life-span developmental theories should be researched before program implementation. Since the educational system emphasizes extrinsic motivation, those aged whose whole identity is their occupation face grave consequences at retirement when productivity is gone; a revision in life-span education could correct or accommodate that flaw. There must be more knowledge about changing developmental tasks throughout life to give education meaning.

Bradley, H. M., and Cooper, L.R. Retirees assist in developing programs for educational enrichment. Adult Leadership, 1969, 17, 383-385.

A plan was devised for training 24 retirees by means of 10 seminars at Polk Junior College to return to communities and teach material to other senior citizens. The 24, given part-time faculty status, helped list needs such as psychology of aging, counseling, eye care, social security, lawyer assistance, and medical care; however, the retirees' role was changed to discussion coordinator when it became evident that technical data was too hard for them to teach. The ultimate goal had great impact as several groups asked for additional meetings.

Dickman, I. R. Getting it all together (GIAT): Teaching human relationships and communication skills in nursing homes. United Hospital Fund of New York, December, 1972. (ERIC Document Reproduction Service No. ED 098 287)

See Section VI

Educational alternatives for senior citizens, proposed sub-project
for funding under provisions of Title I, Higher Education Act
of 1965. 1974. (ERIC Reproduction Document Service No.
ED 086 944)

A major premise for educating the elderly is that it will lead to something better in the lives of participants. Senior citizens need stimulation and companionship, since at retirement they experience three major losses: loss of "work status" that commands respect, loss of daily companionship of others with similar experiences and loss of income. A plan is proposed to meet the need for psychological, social, and spiritual well-being and to provide help in coping with and enjoying life. After outlining some specific aims, the proposal states that community colleges are best equipped to handle formal education, while older persons also enjoy informal programs in community centers. Some examples of current community and junior college offerings are basic reading and writing, health seminars, urban ecology, child development (for foster grandparents), and defensive driving.

Fedo, M. W. North Hennepin's class of 70's. American Education, 1972, 8, 22-24.

North Hennepin State Junior College in Minnesota established a program with roughly 300 senior citizens who can take courses specifically for them or regular college courses for credit; the program was developed under a grant from Title III of the Older American's Act to develop a tuition-free curriculum. Courses for the aged include budgeting on a fixed income, lip reading, and psychology of change. The college which actively recruited, found a great need for lifelong education. Statistics show that $\frac{1}{4}$ of those over 65 are at or below poverty level, and $\frac{1}{5}$ are functionally illiterate and require basic education merely to cope with a changing world. Jubilant older persons praised this program, claiming their brains "weren't asleep." Some older persons even taught some young students subjects such as small business management and labor relations.

Hiemstra, R. P. Continuing education for the aged: A survey of needs and interests of older people. Adult Education, 1972, 22, 100-109.

Under planning programs it is necessary to understand clearly the needs and interests of the aged, especially since Peterson (1971) reported that many aged feel education has no relevance for them. Hendrickson and Barnes (1967) said that old persons faced with personal and social problems should learn a new vocation, keep mentally active, or develop avocational interests, all of which can be served by educational programs. This study sought to clarify various questions by interviews. Important results include: although interests and needs are varied, more attention should be paid to instrumental forms of education; more programs should be at senior centers; and, transportation problems and night classes contribute to limiting participation in programs. The author suggests more research on the extent to which the findings that the aged need instrumental forms is generalizable.

Hirsch, H. Viewpoint: Back-to-school programs for retired professionals. Geriatrics, 1969, 24, 36-41.

The author, founder of the Institute for Retired Professionals, believes that services for the retired must continue to stimulate the mind. He chides the programs which provide only stop-gap and diversionary measures (such as arts and crafts) as failing to meet the needs of an educated and skilled person. He describes his Institute as one which challenges the retiree to develop his mind further. The institute is democratically run, with members forming councils, determining subjects, and preparing papers, all of which create leadership characteristics. The author believes such a program is advantageous to university programs because he thinks the latter cannot provide the social relationships necessary for older persons.

Hutchison, S. L. An investigation of learning under two types of social reinforcers in young and elderly adults. International Journal of Aging and Human Development, 1974, 5, 181-186.

Kaufman, E. Aging and the college curriculum. W. Virginia
Commission on Aging, University of West Virginia, April 1973.
(ERIC Document Reproduction Service No. ED 086 938)

Older people are going to college in ever-increasing numbers because they wish to realize a lifelong ambition and they want to seek new roles. Nation-wide opportunities at universities are currently inadequate but are growing with the expanding need. A good program at the University of Kentucky offers any course in the general catalog for credit with free tuition to anyone over 65 from anywhere in the country. Kentucky also has programs specifically for older people, such as writing workshops and travel seminars. Only a little over 100,000 Americans over 65 attended adult education in 1969 (Aging, May 1970), which is terrible compared to the total of over 20 million people of that age.

Kaufman, E. School bells are ringing for grandparents. Greensboro, N. C.: Pre-retirement conference, May 1971. (ERIC Document Reproduction Service No. ED 086 939)

A high level of activity in old age correlates with high or increased life satisfaction (Palmore, 1968). The author believes that since this is a youth-oriented, work-valued society, the elderly are lost and can productively pursue their own interests only when freed from the pressures of competition with younger people. Morale in retirement is achieved through involvement in intellectual, social, and physical experiences which are meaningful to the person and his society. The author contends that competence in learning may disintegrate only when behavioral programs run out and not according to some chronological pattern.

Lewinski, A. J. Continuing education for adult learners in Empire State College, May 1972. (ERIC Document Reproduction Service No. ED 068 837).

Empire State College was established by the State University of New York to develop flexible approaches to education; as such, it has been developing an adult center and program. In dealing with older adults, a program should emphasize a philosophy of change and development and include tutorial and small group instructional communication. In addition, older persons should be acquainted with emerging educational technologies.

Londoner, C. A. Survival needs of the aged: Implications for program planning. Aging and Human Development, 1971, 2, 113-117.

The author criticizes planners who provide only expressive forms of education: too few educators realize that the aged struggle to achieve competencies in their new roles and tasks, and failure to meet these new challenges results in loss of survival. It is the author's thesis that instrumental forms of adult education will provide competencies essential for survival in old age. Taking a developmental view of education, the author claims that old age, like any other age, has its own problems, and the major challenge of it is to adjust to new ways of living, a task that could be made easier if educational programs were devised to help the acquisition of new competencies. Instrumental education is advantageous because it acts to retard decline rather than to accommodate it with leisure activities which expressive methods do. The author cites five categories for education of the aged: financial matters, health concerns, continued work opportunities, familial relations, and personal needs.

Mason, W. D. Aging and lifelong learning. Journal of Research and Development in Education, 1974, 7, 68-76.

McClusky, H. Y. Education: Background and issues. White House
Conference on the Aging, February 1971. (ERIC Document
Reproduction Service No. ED 057 347)

A margin theory of needs is based on the balance of load (self and social demands) and power (resources, abilities); the major task of the older years is to rearrange the load-power structure, which education can achieve if properly implemented. Four basic needs are coping (education is most important), expressive, contributive, and influence. Education can aid in all these categories; aged education should be "person-oriented" and relieve the aged from the burden of credentialism and competition.

Long-range goals include helping the aged to fulfill lifetime potential, develop self-respect, and serve as models of lifelong fulfillment to stimulate younger people, and to teach society the value of quality education for all ages. The current aged greatly lack lengthy formal education (e.g., 72% over 75 have 8 or fewer years of school); yet age itself is not a barrier to learning. Currently, institutions and government are only beginning to act in this regard; in 1971, 85% of all aged participants in education attended programs sponsored by religious institutions. Those responsible for research and development in this field should consider: 1) What is the best approach to programs: problem-solving or process-and-skills? 2) Who should have primary responsibility for pre-retirement education? 3) What methods and materials are most appropriate for reaching those who rarely, if ever, have participated in adult education? 4) What should be the ultimate goals of pre-retirement education (e.g., slow down activities, replace activities, disengage)? Education for the aging has received the lowest priority in both the education and gerontology fields, but special attention should be given to recruiting the great mass of "hidden" aged. Important issues include: Should expenditures for aged education be based on the proportion of aged in the population or on remaining life expectancy? Should the aged be educated apart from or together with other ages? The author cites research possibilities in this latter area.

Pattison, R. M. Senior citizens renewal action program. Adult Leadership, 1973, 22, 59-60; 84.

This program in the Quad-City area of Illinois sprouted from industry's forcing out capable early retirees to make room for the young. Assuming that education is a basic right of all persons regardless of age and sex, the program seeks to develop within senior citizens a feeling of usefulness, to provide opportunities for skill development and to relax traditional barriers to educational participation. Among the offerings are planned educational tours to alleviate boredom and loneliness, one-to-one academic instruction, and formal and informal classes.

Peterson, D. A. Older persons, nutrition, and adult education: A new opportunity. Adult Leadership, 1973, 21, 261; 263.

The author proposes that the Nutrition Program for the Elderly Bill of 1972 for those over 60 is an ideal way to attract the aged to educational programs. By providing funds for at least one hot meal per week at least 5 days per week in a community setting, the bill will also serve the purpose of reducing isolation. Citing Hiemstra's (1972) finding that the aged do have an interest in and a need for education, the author proposes this setting as an ideal for program implementation. The author also warns that planning and operating such programs should not be left in the hands of food delivery personnel.

Schonfield, D. Translations in gerontology: From lab to life: Utilizing information. American Psychologist, 1974, 29, 796-801.

See Section II

Scott, F. G. Innovative educational opportunities for older persons.
Adult Leadership, 1974, 22, 337-343.

In devising educational programs for the senior citizen, it is most important to view him not as a "student" but as a "teacher," for this is less threatening and more status-raising. The program should be such that the senior can be placed in the role of teaching the young about aging with no implication of the need to develop further skills. The University of Oregon operates in this way, as in its Psychology of Aging seminar, in which seniors were recruited for assistance in a program for gerontology students. The one-to-one relationships that were established were extraordinarily successful in building mutual understanding. A pre-retirement program operates similarly in using university employees. The author believes that requiring seniors to take courses about aging is like requiring blacks to take black studies: it should not be done. Essentially, the senior should be able to control his own participation in the entire program.

Stanford, E. P. Education and aging: New task for education.
Adult Leadership, 1972, 20, 281-282; 292-294.

The author cites 4 major purposes of education for older people: 1) give them understanding of changes taking place and have them view aging as normal; 2) impart to them knowledge and skills to maintain health, stimulate mental capacity, develop competencies, lessen anxiety; 3) have them recognize that learning in itself can be interesting and stimulating; and 4) provide for them a richer social experience and better understanding of the world. Many different types of institutions besides educational ones provide educational programs; for example, the I.L.G.W.U. trains senior citizens to visit others, and the Oliver Wendell Holmes Foundation helps businessmen and professionals retire gracefully. The author cites three current problems with educational programs: 1) inadequate information about what is available; 2) inaccessibility of programs; and 3) prohibitively expensive programs.

Stetar, J. M. Community colleges and the education needs of older adults. Journal of Higher Education, 1974, 45, 717-721.

Community colleges have demonstrated a commitment to life-long learning by conducting a variety of programs specifically designed for older adults. The author, while lauding programs such as travel clubs, feels that community colleges should not be involved with them. These colleges should provide only purely educational services, for otherwise they may turn into total social service institutions. A community college can organize seminars for social scientists, city planners, policemen, and all others who regularly come into contact with the aged to ensure that the elderly's special needs are met. Social services, the author believes, should be reserved for social service agencies.

U.S. Department of H.E.W., Administration on Aging. Objectives, priorities, and progress of the Administration on Aging's Direct Training Grant program, June 1969. (ERIC Document Reproduction Service No. ED 052 420)

Most of this document discusses the status of various grants and the priorities that the Administration had for passing grants. However, as a matter of policy, it states that the primary goal and broad objective of educational and training programs in aging in this program is to equip adequate numbers of personnel (including older people) for leadership and professional practice in programs and services through which the older population can find: 1) opportunity for independence, self-expression, and fulfillment; and 2) assistance in coping with the changes and crises characteristic of the later stages of life.

V. WORK AND RETIREMENT

Babic, A. L. The older volunteer: Expectations and satisfactions. The Gerontologist, 1972, 12, 87-90.

Older volunteers can be even better than younger ones, but some special considerations are necessary. An older person will often want to work in a familiar area at first to offset pronounced fears, and a volunteer director must be patient and delay the meeting of his needs by not forcing the old person into new areas before the person is ready. Often the volunteer himself will recognize other needs. Old volunteers are happiest when they can move quickly into an assignment, so task-oriented ones are best. One must consider the costs of volunteering, such as transportation and meals; these should be provided. Having old volunteers in groups is often highly beneficial because of peer support and new friendships. Volunteers over 65 are as consistent in attendance and performance as those somewhat younger.

Belbin, R. M. and Clark, F. The relationship between retirement patterns and work as revealed by the British census. Industrial Gerontology, 1970, 4, 12-26.

This census study shows that the retirement age of 65 was more rigidly observed in Britain in 1966 than in 1961, perhaps because more workers were employed in large organizations that felt a fixed age was more convenient. Those in the Flexible Retirement Group of this study (no fixed retirement pattern) could give a clue as to how people would behave if they were freer to choose their time of retirement and less subject to economic, social, and political pressures. Basically, it seems, there would be more older people at work. The authors claim that men don't want to be dictated to about when to stop working. It is necessary to counter rigidity in retirement and have greater flexibility between work and leisure.

Belitsky, A. H. Private vocational schools: An underutilized training resource. Vocational Guidance Quarterly, 1970, 19, 127-130.

Private vocational schools are under-utilized for motivating and retraining unemployed older workers not expecting to find work in their previous occupations. Students in these schools are motivated by a continuing sense of achievement during the course of their occupational education. The schools emphasize job simulation and employment as the ultimate goal, which could especially stimulate the older worker. If more older workers attended, more guidance personnel, who can be especially successful with these people who have usually established dependable work habits, would be needed.

Beverly, E. V. Turning the realities of retirement into fulfillment. Geriatrics, 1975, 30, 126; 131-132; 134; 139.

Research shows a direct link between life crises and all types of disease; any readjustment enhances the chance of illness. Retirement, especially if forced or bitter, is a major threat in this sense. Past studies have been contradictory regarding the effects retirement has on various people; this implies either that there can be no generalizations or that more research is necessary. Sauvy, in France, insists that men should have the right to decide when to stop work and that there should be a series of gradual transitions from full activity to non-activity. Variables important to successful aging and retirement include cultivating good habits, improving social skills, and developing a philosophy giving meaning to the whole of life.

Boglietti, G. Discrimination against older workers and the promotion of equality of opportunity. International Labor Review, 1974, 110, 351-365.

Most countries impose an upper age limit on access to civil service, which tacitly encourages prejudices in the private sector. Unemployment is higher for older workers of all levels of education, and within each age group it is higher for those of low education. Among the suggested measures for continued employment are: private enterprise should promote continued employment, there should be statutory or contractual guarantees regarding notice, and government should become the employer as a last resort.

Byron, D. Happiness is a bill of sale... Adult Leadership, 1969, 18, 136-138; 162.

Citing examples of retired adults learning new fields successfully, the author suggests motives. One motive is employment, this being a work-oriented society. Most elderly people working in post-retirement use already known skills (e.g., Senior Concert Orchestra in N.Y.), however, in one 3-year period, VISTA enrolled 775 persons over 65 for a training program. A second motive is the need to know and keep up, which may also partly explain Emory College's success in attracting people such as retired psychologists, dieticians, and missionaries to challenging courses such as Eastern Folklore and Revolutions in Theology. In the future, the author suggests the need for more work and job training opportunities and more open doors at universities.

Christrup, H., and Thurman. C. A pre-retirement program that works.
Journal of Home Economics, 1973, 65, 20-22.

A program at the General Services Administration that tries to alleviate depression among retiring employees has found an individual approach to be important. Among the keys to encouraging participation are: 1) make participation voluntary and open to all within 15 years of retirement eligibility (to emphasize planning, not retirement); 2) group size should be 12-20 people; 3) there should be informal sessions; 4) freely discuss feelings and plans about retirement; and 5) emotional and psychological aspects of retirement should be discussed.

Davis, D. L., and Taylor, W. The Senior Community Service Project: A manpower model for the older disadvantaged. Industrial Gerontology, 1975, 2, 120-134.

The objectives of this program, funded by the Labor Department through the National Council on Aging, are to meet these significant needs of low-income persons: additional income, regained sense of involvement in the community, and upgraded skills for permanent jobs. Of the enrollees in the program, three-fifths were over 65, the majority were women, three-fifths had no high school diploma, and two-thirds were white. They found jobs in places such as libraries, personal service, and education. It was found that having a high school diploma greatly aided job placement. Program participants have shown they can measure up to - - and often exceed - - standards for younger workers.

Fillenbaum, G. G. and Maddox, G. L. Work after retirement: An investigation into some psychologically relevant variables. The Gerontologist, 1974, 14, 418-424.

While men from lower rungs on the occupation ladder may work after 65 for financial reasons, those from higher strata may do so for social and psychological reasons. Streib and Schreider (1971) found that those working after retirement had a negative attitude to retirement (balance theory). Friedmann and Hairghurst (1954) found that where money is no object, those with an intrinsic commitment to work (work for sense of fulfillment, etc.) were more likely to do so after 65. Personality variables such as field independence may be related to continued work, as is peer influence. The present study examined university professors subject to mandatory retirement. Most pre-retirement ones said their post-retirement plan was to work. One significant finding was that nearly all healthy, retired faculty worked for pay at some time after retirement. The authors, citing their massive results, conclude that psychological variables are important in determining work after retirement (although they admit not having studied other high-level occupations).

Fisher, P. Labor force participation of the aged and the social security system in nine countries. Industrial Gerontology, 1975, 2, 1-13.

Countries with mature social security systems, such as the United States, Canada, and seven European countries studied here, have had a decline in rates of labor force participation by the aged. This study examines any connection. Between 1950 and 1970, the percentage of the over-65 population in these countries rose an average of 21.9% while labor force participation for them was down 39.6% (the United States had the second lowest drop). Ill health and inability to find employment were chief causes (71% in the U.S.), while technology change, obsolescence of skills, and social security benefits eased retirement. The important ratio is between pre- and post-retirement incomes and whether pension benefits can be protected from inflation. It has been shown, in this 20-year period, that higher benefits lead to higher labor force withdrawal of older workers ($r = .6$). There are no real incentives to continue working after 65; for example, in the United States, one must still pay into the system without hope of recovering it all, while other countries are a little more generous.

Jacobson, D. Rejection of the retiree role: A study of female industrial workers in their 50's. Human Relations, 1974, 27, 477-492.

This British study explores pre-retirement attitudes of older women as compared to men and also the extent that situational and attitudinal variables explain feelings toward retirement. Women were less favorable to retirement than men, though both sexes rejected rigid rules. Despite the imminence of retirement, women were less likely to know about their pension, and men showed a significant relationship between knowing the size of one's pension and willingness to retire. Women tended to be more pleased with their jobs and such satisfaction increased over the years while it decreased with men. Women also were strongly influenced about retirement by the location of their principle social contacts (in or out of work) while men were not so much. The author suggests that in light of recent changes in women's roles in society, further large-scale research should be done on the impact on older women's attitudes toward retirement.

Jaslow, P. The contribution of work, work-related, and other factors to the morale of older American women. (Doctoral dissertation, Brandeis University, 1973; University Microfilms No. 74-14, 984)

Little research has been done concerning the non-economic correlates of either work or retirement among females. The author hypothesizes that older working women have better morale than retirees or those who have never worked. Results from this study generally confirm the hypothesis, and the author inferred that a psychologically-based theory of successful aging might be useful. Among the stated recommendations are a return to flexible, not mandatory, retirement ages and an addition of job opportunities for older women in the public service field.

Keahey, S. P., and Seaman, D. F. Self-actualization and adjustment in retirement: Implications. Adult Education, 1974, 24, 220-226.

The expressed problem is whether or not there is a relationship between self-actualization and adjustment, and if there is, then maybe a repressed need (retirement education) could be approached from a felt need (self-actualization). Maslow (1968) notes that the self-actualized individual develops a strong character structure which can meet change and frustration effectively, and the Personal Orientation Inventory enables self-actualization to be defined operationally. From this study it is inferred that programs aimed at assisting in adjustment to retirement must consider those self-actualization values which best predict one's ability to change (e.g., self-regard, spontaneity). The authors suggest that instruments such as the P.O.I. be explored for further use in this area.

Meier, E.L. Over 65: Expectations and realitites of work and retirement.
Industrial Gerontology, 1975, 2, 95-109.

A mid-1974 Harris Poll showed that one-third of retirees were forced to retire and most Americans are against mandatory retirement. About four million people over 65 (31%) are not working who would like to, and more persons of lower income are in this category (although 23% of those still earning over \$15,000 annually wanted to work). Furthermore, 87% of those responsible for hiring and firing agree that employers discriminate against those over 65 (and four-fifths of the total public also feels this way). Job services for the aged are good but limited: a total structural change is needed to make the job market receptive to older people. In terms of having a flexible retirement policy, the survey showed that those who hire and fire don't agree that it is hard to make exceptions for those not ready to retire.

Mokert, C.E. Pre-retirement education: A community responsibility
Adult Leadership, 1974, 22, 233-235.

A former commissioner of the U.S. Department of Labor says that encouraging the lowering of the retirement age to 55 would be economically disastrous because, in ten years, there will be fewer people entering the work force and more retiring early. Trends point in that direction because twenty years ago, about half of the men over 65 worked or were looking for a job and today only one-fourth do. By 1980, it is projected that just one-fifth will be working or looking for a job. The author organized a successful, comprehensive community pre-retirement program staffed by volunteers (professors and community specialists). Courses included psychology of retirement, health, nutrition, housing and investment.

Moser, R. H. The old folks at home: Variations on a theme.
Journal of the American Medical Association, 1974, 230, 1311-1314.

The A.M.A. filed a brief for the plaintiff in a case challenging the Federal Employee Mandatory Retirement Law. The A.M.A. believes that an older worker should be allowed to continue in productive employment as long as he wishes and is able to maintain a satisfactory level of efficiency. This would enable the worker to have more years of independence, dignity, and usefulness. Mandatory retirement stigmatizes a person as "non-productive," and medicine sees it as a threat to health and life expectancy, which is of little use if one cannot work. In addition, support systems for the retired could become prohibitive to the economic system.

Rosenblum, M. The last push: From discouraged worker to involuntary retirement. Industrial Gerontology, 1975, 2, 14-22.

Many who see themselves as employable but are unemployed for job market reasons become so discouraged that they say they are no longer interested in a job. Workers over 55 constitute one-tenth of the unemployed and one-third of those who would work, but think that no job is available to them. Those over 55 comprise 26.5% of the population, but only 15.3% of the labor force, while younger groups have opposite percentages. If these discouraged workers were added to the unemployment rate, it would be raised an average of 15%. The hopelessness with which many over 55 view the situation may lead to their giving personal rather than job-market explanations for not working, thus biasing statistics and the true picture.

Schulz, J. H. Retirement: Background. White House Conference on Aging, February 1971. (ERIC Document Reproduction Service No. ED 057 347)

This report from the White House Conference cites major goals, including providing employees with retirement information and assistance in its planning and studying increased flexibility in time of retirement. There has been a recent trend to earlier voluntary retirement, partly because of increased pensions (Barfield & Morgan, 1969). A "three-country" study showed that men in Denmark and Britain see retirement as a time for relaxation after a lifetime of work, but Americans see it as a time of activity (Shanes et al., 1968). The desire for leisure has greatly increased in America since World War II, but allocation of an increased portion of leisure time to retirement magnifies the difficulty of the aged in maintaining adequate incomes and may be poor utilization of leisure time (Kreps, 1966). The Secretary of Labor reported that roughly one million productive man-years are lost each year in a good economy because of the unemployment of men over 45; the social cost here is inestimable, but cost in unemployment insurance was about \$1 billion annually (Wirty, 1965).

Schulz, J. H. Retirement: Issues. White House Conference on Aging. February 1971. (ERIC Document Reproduction Service No. ED 057 347)

The major issue on this subject is whether government should bow to current pressures to lower the retirement age below 65. There is nothing sacred about that age. Some say it should be lowered because the workers desire it, while others point to the information that one can normally work beyond 65. Certainly, if the economy booms, work hours can be shortened and vacations lengthened: it should be emphasized that the concentration of leisure time past 65 should be avoided because of the unique social and psychological problems now associated with that age.

Smith, J. M. Aging and retraining: A study of characteristics of older workers who volunteer for retraining. Occupational Psychology, 1973, 47, 141-142.

There has been a reluctance for older workers to enroll for retraining when their jobs have been eliminated; there is little data on old workers who do enroll, so this study aims to study whether all old workers are alike and to identify areas of difference. Four broad areas of significant differences were found: occupational history and ambitions, home circumstances, personal characteristics, and past experience with adult education. Most retrainees had less stable occupational histories and had definite and higher ambitions for their children. They also showed marked superiority in intelligence and had largely attended evening classes and vocational training in the military. The author suggests this research: if volunteers for retraining are less stable in occupations, will they stay in the new field trained for.

Stagner, R. Boredom on the assembly line: Age and personality variables. Industrial Gerontology, 1975, 2, 23-44.

Boredom may be due more to constraints than to repetition or unpleasantness. Is assembly line monotony a special problem for older workers? Current, unclear data show generally that older blue-collar workers are more satisfied with their jobs, but it is uncertain if this applies specifically to the line since most workers there are young (older workers might use seniority to get off the line). Physiological and psychological data show wide individual differences in reactions to paced, constrained jobs. Since assembly line techniques seem relatively permanent, the author feels more extensive and careful research is needed to better determine the relationship between boredom and individuals with respect to aging.

Stewart, J. S. Retraining older workers for upgraded jobs. Industrial Gerontology, 1969, 2, 26-21.

The writer, manager of employee training for the Penn Central railroad, describes training older workers from manual jobs for sometimes complex clerical jobs. Trainees were an average of 50 years old with an average thirty years experience. Most were from minority groups, and the average length of schooling was nine years. Psychological tests were administered, but the normal minimum for qualifying for training was drastically reduced (from 90 out of 200 to 16). Results were remarkably successful, and the author reasons that given the background and results of these groups, the number of truly untrainable people must be small. Also, retraining these employees was not only socially desirable, but also economically beneficial, for the costs of retraining were offset through the productive end result.

VI. SERVICES

Anderson, N. N. Effects of institutionalization on self-esteem. Journal of Gerontology, 1967, 22, 313-317.

In the retirement home studied here, the institutional sample did not significantly differ from a non-institutional one in regard to self-esteem. Level of interaction was more closely related to self-esteem than institutionalization. Those in the retirement home who identified with those in their own age group had more self-esteem than those who did not. The author concludes that it seems that institutions per se are not detrimental to self-esteem, so administrators of homes do have the capability of decreasing negative effects.

Bell, T. The relationship between social involvement and feeling old among residents in homes for the aged. Journal of Gerontology, 1967, 22, 17-22.

See Section II

Bronson, E. P. An experiment in intermediate housing facilities for the elderly. The Gerontologist, 1972, 12, 22-26.

See Section VII

Chicago Department of Human Resources. Senior Centers - 1968.
(ERIC Document Reproduction Service No. ED 054 402)

Most of this document discusses the status of various Chicago senior centers. Of general interest, there is a definition of a good senior center that requires, basically, that it be open at least five days per week all year, has paid professional leadership, and offers at least three of the following: recreation, adult education, health services, counseling and other social services, and community and volunteer services. Peculiar and salient problems include the phenomenon that membership in the centers is largely confined to residents of the building where the center is located, partly because these people don't like "other" people coming in. Also, two-thirds of the members of all the centers have incomes below a bare poverty level.

Cohen, M. G. Alternative to institutional care of the aged.
Social Casework, 1973, 54, 447-452.

Many old people, even those with physical defects, desire to stay in the outside world but still need many services provided by institutions. Day care programs can provide a solution. The Levindale Day Care Program in Baltimore is for the elderly who are limited physically and/or psychosocially but who can still function within the community. Commonly, those participating can no longer be cared for at home during weekdays. This program has delayed the need for institutionalization in many cases.

Comstock, R. L., Mayers, R. L. and Folsom, J.C. Simple physical activities for the elderly. Hospital and Community Psychiatry, 1969, 20, 377-380.

The authors claim that if the aged person does not adequately exercise, there may be severe physiological deterioration of all sorts. They outline a large program of large and minute exercises which serve different parts of the body; even the highly disabled can do many of these tasks, and they are encouraged to exercise to their maximum capacity. For instance, just rolling over in bed when the sheets are changed is good exercise. Group exercise is good because patients are rewarded by others' performances of others. Complex facilities are unnecessary: improvisation in any space is fine for good exercise. Hospitals should establish programs and competitions in all areas, including wheelchair patients in their activities.

Dickman, I. R. Getting it all together (GIAT): Teaching human relationships and communication skills in nursing homes. United Hospital Fund of New York, December 1972. (ERIC Document Reproduction Service No. ED 098 287)

The author outlines an extensive program for teaching nursing home personnel of all levels how to better understand and communicate with their patients. The six lessons, which often call for role playing are called: Listen!, See!, Speak!, Touch!, Cherish!, and Sound of Silence. For each the author discusses the need for staff to take an active interest in each patient and cites numerous examples where patients' lives or well-being have been saved by staff members alert to even minute deviations in appearance or behavior. The program has been successful and has been received received enthusiastically by those taking it.

Fink, H. H. The relationship of time perspective to age, institutionalization, and activity. Journal of Gerontology, 1957, 12, 414-417.

Subjects in this study consisted of two groups of 30 men each, one non-institutionalized and the other in infirmaries mostly for inability to provide financial support. Results show that the institutionalized group was more concerned with the past and less with the future than the other group. Although in each group the older members were more past-oriented than younger ones, it must be emphasized that the overall findings hold throughout all ages in each group; for example, older, non-institutionalized men were far more future-oriented than younger, institutionalized ones. The author concludes that institutions cause some personality changes. Since the author believes it is impractical to have gross changes in institutions, it is necessary to change the individual's conception of the situation through counseling and activity programs.

Gustafson, E. Day care for the elderly. The Gerontologist, 1974, 14, 46-49.

The author believes day care centers are good for the frail, moderately handicapped, or confused older person. Long-term care facilities with day care programs should avoid having the same administration and staff for both in order to avoid a "death row" aura, the author feels. Neighborhood day care centers have a psychological advantage because they do not have an institutional character; they also give middle-aged and elderly women an opportunity to care for others. The Kuakini Day Care Center in Hawaii places great emphasis on the importance of the family, and in this regard it encourages homemaker activities and, interestingly, does not provide transportation, leaving that as the family's responsibility.

Hawaii State Senior Center. Third annual report. Honolulu, June 1972. (ERIC Document Reproduction Service No. ED 069 275)

Many of the activities of this senior center are outlined. Group activities include education (e.g., language, sewing), recreation and leisure, festivals and bazaars, and volunteer services (for within the Center). The Center also tries to educate the public about the center's role and senior citizens; for example, it emphasizes the positive contributions of the aged and asks for "friendly visitations" from the public. Counseling and providing leisure activities for those who are in the pre-retirement stage to prepare them for a creative and rewarding retirement seem to be emergent community needs.

Finkelstein, M., Rosenberg, G., and Grauer, H. Therapeutic value of arts and crafts in a geriatric hospital. Journal of American Geriatrics, 1971, 19, 341-350.

Arts and crafts programs emphasize creativity, independence, productivity, socialization, remotivation, and self-esteem, claim the authors. In describing the program at Montreal's Maimonides Hospital and Home for the Aged, they discuss various formats for providing facilities. Many patients were determined to exhibit and sell their creations, and the receptivity of the public, both in enthusiasm and money, was beneficial as it set aside some fears of patients that they were unproductive and incapable of earning money. The authors cite several relevant factors of the aging process, including the need for teachers to be especially simple and straightforward in presenting new material. The arts and crafts program seeks to rehabilitate the patient for a more productive and creative life.

Gottesman, L. E. Milieu treatment of the aged in institutions.
The Gerontologist, 1973, 13, 23-26.

Milieu treatment attempts to alter the total environment to change the behavior of persons not acting by acceptable social standards. The author describes the change of one institutional setting from sterile to active and the positive changes thereafter displayed by the patients, thus demonstrating the great effect of the environment. Gone were the tiled walls, barred doors, locked windows, barren day rooms, and limited activities which stimulated patients to stare into space; in were bright colors, personal spaces, pictures, curtains, relaxed rules to allow more individual activity (such as shaving), all of which stimulated greater activity. Results in this experimental ward show that more patients knew and expressed feelings about each other, viewed the world more complexly, were more likely to express worries and to deal actively with problems-- all signs of greater ego strength.

Haggerty, A. D. The role of the long-term facility. In M. Mitchell (Ed.), A practical guide to long term care and health services administration. Greenvale, N.Y.: Panel, 1973.

A long-term care facility's greatest responsibility is physical care, but the new therapeutic approach at least equally recognizes social-emotional needs of the patient and calls for bringing together the "outside" world with the patient. Perhaps the most intensive effort should be for the most physically and mentally deteriorated to rehabilitate and remotivate them. The author cites relevant statistics from a 1969 F.H.A. survey on nursing homes: 90% of all patients are over 65, 70% over 75, 50% over 77, and 33% over 85. The median age is 79.1 (compared to the national average of 73 for the over-65 group), and 67% are chronically ill, while 33% are convalescent. The National Center for Health Statistics reports that one-sixth are always confined to a bed, one-fourth part-time, one-fourth can't walk, and one-sixth can walk only with assistance. There is a trend for the acutely ill to enter a home instead of a general hospital.

Letcher, P. B., Peteron, L. P., and Scarbrough, D. Reality orientation: A historical study of patient progress. Hospital and Community Psychiatry, 1974, 25, 801-803.

Regardless of the circumstances surrounding the institutionalization of an old person, he is likely to withdraw, breaking off relations with others and becoming less concerned with the mechanics of daily living. Reality orientation attacks deterioration by stimulating the patient through repetitive orienting activities and placing him into a group for socializing. As a 24-hour-a-day program, it re-educates patients in the most basic information. The authors emphasize that a patient's physical condition is unrelated to his likelihood of improvement and that confusion and disorientation are not necessarily permanent consequences of brain damage. Although this program is used mostly with the institutionalized elderly, the authors suggest it might be even more effective as a preventive measure.

McClannahan, L. E. Therapeutic and prosthetic living environments for nursing home residents. The Gerontologist, 1973, 13, 424-429.

Environmental variables are important determinants of behavior of institutionalized patients. Even small components of design can modify behavior; for example, handrails in corridors and walls that absorb light both make walking around more pleasant and inviting. Evidence showing that rate of verbal behavior increases in age-heterogeneous settings argues against age-segregation, although not much is known about the advisability of segregation by health or performance. To stimulate more self-care, grab-bars should be in showers and there shouldn't be doorknobs because of arthritis, for instance. It has been found that low levels of motor behavior lead to overall deterioration of physiological processes, and long periods of social isolation do the same for social and mental processes, so it is obviously quite important that institutions tend to even small details so as not to contribute greatly to their patients' ruin.

Parker, F. A. Second childhood. Times (London) Educational Supplement, August 9, 1974, pp. 12-13.

The author describes the successful use of special education methods for sub-normal children on severe geriatric patients. The pilot program used patients with severe disorientation and memory loss, incontinence, apathy, and general decay. The aim was to make for richer, happier lives by re-creating personal identities, re-developing personal responsibility, and encouraging recall and memory. The results were a grand metamorphosis of the ward into an active, cheery place. The basis of the education was daily living. Independence was encouraged in every facet, and patients were consulted about personal appearance. Staff interacted with them to find out how much memory existed in each so rebuilding knowledge and thought order could begin. After initial unresponsiveness, incontinence disappeared at eight weeks, occupations were established at eighteen weeks, and by six months the patients took initiatives and were generally in much better health.

Rodstein, M. Challenging residents to assume maximal responsibilities in homes for the aged. Journal of the American Geriatric Society, 1975, 23, 317-321.

Basic to the challenge for responsibility is a program for activating the aged, and the author distinguishes between audience-type activities and participatory activities of all kinds. He claims that a total activity program also aids the staff in overcoming their strain against hopelessness and boredom. Basically, each patient should exercise to his greatest capability, even if this be only rocking in a chair, for mild exercise will significantly improve cognitive abilities even of institutionalized mentally ill geriatric patients. In the present study, sessions included brisk walks, calisthenics, and body movements on a regular basis. After 3 months, there was a marked improvement in recall, logical thinking, and reality orientation, while a control group doing arts and crafts, games and music showed no significant change. The author also would encourage attractive appearance of patients to bolster qualities such as self-esteem, acceptance, and morale.

Shapiro, E. The residents: A study in motivation and productivity among institutionalized octogenarians. The Gerontologist, 1973, 13, 119-124.

The author believes that the elderly can be productive if properly motivated. She proposed starting a newspaper written by and for residents of a good geriatric institution. She found much initial resistance by patients to the new idea but was able to break through it by establishing one-to-one relationships. Some results of this creating and writing included: residents wrote much, became more aware of the outside world, interest in television expanded to news-related programs, read more, gained confidence in their own abilities and acquired enthusiasm for knowledge. The author concludes that it is necessary to stimulate the intellectual needs of elderly men and women, and such stimulation can totally improve an old person's outlook.

Shore, H. The current social revolution and its impact on Jewish nursing homes. The Gerontologist, 1972, 12, 178-180.

If staff members are of a racial minority group and they tend to patients of a religious minority group, the author contends that there is a great possibility for harm to the social and psychological well-being of the residents. Nursing home aides often come from poor backgrounds and are often black; the author believes that stereotyped relationships can occur, and the aides may feel threatened by what is perceived as a white-dominated environment. He concludes that the best care in nursing homes can be given by providing for the staff and helping them understand their contribution.

Tallent, N., and Lucas, D. Socialization of the aged: A study of chronically ill men in a veterans administration center. Geriatrics, 1956, 11, 266-272.

The researchers acquired their data through individual interviews with men in one ward, asking for friends and acquaintances inside the institution and who sleeps on either side of them. There was not much socialization found, and there were many members of the ward who had no friends and were not the friends of any others. Mutual friendships were quite rare; knowledge of who slept on either side was surprisingly poor. The authors conclude this early, important study by noting that it appears that socialization in institutions where persons must take the initiative for activities is poor.

Tobin, S. S., Hammerman, J., and Rector, V. Preferred disposition of institutionalized aged. The Gerontologist, 1972, 12, 129-133.

The authors complain that the current emphasis on institutions is partly responsible for the inadequacy of services to the aged; because there are relatively few different types of services, the aged are often forced to seek institutionalization when they really need only a few services. The authors would prefer a radical change whereby supportive services could be provided in components, releasing institutions to care only for those seriously in need. Better community services could thus reduce the number of institutional beds. By interviewing some applicants to institutions and having experts rate responses, the authors identified eight general components,, which if provided separately, might allow many of those currently forced to be institutionalized to remain in the community. The components are: counseling, short-term visit to institution, home health care, special living arrangements, money, medical diagnosis, social club activities, and vocational rehabilitation.

VII LIVING SITUATIONS

Bennett, R. Living conditions and everyday needs of the elderly with particular reference to social isolation. International Journal of Aging and Human Development, 1973, 4, 179-198.

Bronson, E. P. An experiment in intermediate housing facilities for the elderly. The Gerontologist, 1972, 12, 22-26.

When a change in living arrangements for a still-mobile old person is necessitated, institutionalization is often not suitable. To try to remedy the problem, the Philadelphia Geriatric Center bought rowhouses adjacent to it so each could house several elderly women. To qualify, each woman has to have good control of her mental faculties, high functional capacity, and be able to function independently and use appropriate judgment in personal matters. The so-called intermediate houses are essentially regular apartments, with services like garbage disposal and cleaning provided by the Center. The residents, who have the services of a social worker, are free to conduct their own lives while enjoying the benefits of companionship and the support of the Center. The houses are located in an age-integrated neighborhood, providing residents with natural contact with younger people, and the author claims that it is preferable to convalesce after illness in an intermediate house than in a nursing home because of greater morale, self-confidence, and dignity.

DeLong, A. J. Environments for the elderly. Journal of Communication
1974, 24, 101-112.

Ehrlich, I. F. Life-styles among persons 70 years and older in
age-segregated housing. The Gerontologist, 1972, 12, 27-31.

This study focuses on the aged in age-segregated housing, on what an old person does and whether he does it alone, and on those persons of good health and income (i.e., who had some choice in life-style). It was found that life-styles and number of activities were not mutually exclusive; that is, individuals may have performed activities indicative of different types of life-styles. The number of activities engaged in was not necessarily indicative of life-style, and life satisfaction didn't always decrease even if activities did. The emphasis is not on amount of activity but quality of participation; for example, one can still be active though alone. If social planners blindly accept disengagement theory, they may make policies isolating the aged and decreasing their choices for maintaining or improving their life-styles, whereas this study would emphasize just the opposite. Variety must be encouraged.

Sherman, S. R. Patterns of contacts for residents of age-segregated and age-integrated housing. Journal of Gerontology, 1975, 30, 103-107.

One claim for age-integrated housing has been that the old need stimulation from the young. However, this study found that in terms of social contacts, only the pattern of contacts differed much, not the extent. Those in retirement housing saw relatives less often than those in conventional housing, but they also had more new friends and visited more neighbors. The author concludes that where one lives is not so important as having the opportunity to choose according to one's needs.

Wershow, H. J. Aging in the Israeli kibbutz: Growing old in a mini-socialist society. Jewish Social Studies, 1973, 35, 141-148.

The author suggested in a previous paper (1969) that a kibbutz can absorb more strain than a nuclear family structure because it serves a dual purpose: a "university" for the active aged and a "womb" for the maladjusted. Respondents to interviews in this study, men and women over 65, were all generally alert, interested, healthy, and physically vigorous. Interestingly, only 2% were retired, although most aged do experience a downgrading of occupational status. A substantial number work at least twice as much as required. However, a sizable number have no close friends, and it seems that many problems, such as ill health, exist also in a kibbutz. The point is made, though, that it is better to be old and well off than old and poor.

Zampella, A. D. In support of the natural sociological environment for the elderly. Journal of the American Geriatric Society, 1973, 21, 172-174.

The author believes that the most natural habitat possible is the most conducive to optimal individual stability: in it one would maintain self-esteem, independence, and a great degree of mental and physical health. The elderly should live at home if at all possible, says the author, although a retirement community which allows independence is a reasonable alternative. The deleterious aspects of the aging process on personality structure could be slowed or eliminated by this close approximation of a natural environment.

GERONTOLOGY: An Annotated Bibliography

(Supplement to CASE-08-75)

**Prepared by: Robert L. Plotz
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**Report No. CASE-33-76
August, 1976**

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I. GENERAL

Bengtson, V.L., Dowd, J.J., Smith, D.H., and Inkeles, A., Modernization, modernity, and perceptions of aging: A cross-cultural study, Journal of Gerontology, 1975, 30, 688-695.

It has been suggested that the status of the aged declines with societal modernization. The authors' twin hypotheses are that favorable attitudes to aging and the aged are inversely related to (a) an individual's modernity (e.g., exposure to technology) and (b) the societal modernization. Six countries of widely varying types were studied. It was found that there may be some inverse relationship between positive attitudes and societal modernization; however, there was no support for the same relationship with individual modernity. The authors suggest that the corrosive effects of industrialism on the treatment of the aged have perhaps been exaggerated.

Thorson, J.A., Variations in attitude toward aging as a function of educational level, 1975, ERIC Document Reproduction Service #ED 110 845.

Research shows that people prefer to interact with almost any group but the elderly. These negative attitudes toward the aged reinforce negative self-images of the group. In this study it was found that one's race and social class don't influence attitudes toward the aged much. However, there was a positive relationship between high educational level and positive attitude toward the aged.

II. PSYCHOLOGICAL CHARACTERISTICS

Alderson, M., Relationship between month of birth and month of death in the elderly, British Journal of Preventive and Social Medicine, 1975, 29, 151-156.

Many studies indicate a correlation between milestones and time of death in the aged. For instance, widowers have an increased mortality rate, especially in the first six months following their wife's death. In the present study, there was a higher death rate in the three months following the aged's birthday month. Perhaps the birthday is a reminder of growing older and, thus, affects morale. The author wonders if there is an excess of certain causes of death and if certain birthdays are particular milestones.

Atchley, R.C., Selected social psychological differences between men and women in later life, Journal of Gerontology, 1976, 31, 204-211.

The author surveyed retired teachers and phone company employees of both sexes. Work attitudes for older men and women are the same: women take work very seriously. Both sexes embrace job success, but women are more likely to be lonely and depressed and sensitive to criticism. A higher proportion of men see themselves as "old".

Bielby, D. and Papalia, D.E., Moral development and perceptual role-taking egocentrism: Their development and interrelationship across the life-span, International Journal of Aging and Human Development, 1975, 6, 293-308.

The authors found a curvilinear relationship between moral stage levels and increasing age. Older males show greater variability in moral reasoning than females, perhaps because they have had a greater variety of life experiences. The relationship between moral development and egocentrism in the elderly is similar to that in pre-adolescents. Males are consistently less egocentric and less variable in task performance.

Birkhill, W.R. and Schaie, K.W., The effect of differential reinforcement of cautiousness in intellectual performance among the elderly, Journal of Gerontology, 1975, 30, 578-583.

If cautiousness is one of the ability-extraneous variables that hinder the aged's performance on intellectual measures, one would expect those in low-risk conditions to do better than those in high-risk conditions. Results from testing in various conditions confirms that cautiousness may operate the least in low-anxiety, low-risk conditions, but it can also be minimized in high-society, high-risk situations. The results suggest also that the aged may retain an abundance of cognitive resources yet untapped. Fruitful intervention programs are needed.

Birren, J.E., Psychological aspects of aging: Intellectual functioning, Gerontologist, 1968, 8, 16-19.

There are three reasons for asking about an increment or decrement in mental abilities with age: cultural (influences expectations); scientific; and practical (relevance to employability). Mental decline is not universal and is closely related to health. Expectations of mental performance must be based on the individual, not on an assumption for the whole population.

Clayton, V. and Jellison, J.M., Preferences for the age and sex of advisors: A life span approach, Developmental Psychology, 1975, 11, 861-862.

The authors sought to discover the age and sex of people sought for advice on various personal matters by people of five different age groups. The results show that the age of advisors increases as the age of the subject cohort increased, but people don't select advisors of the same age. The age range of preferred advisors was 34-55, as adolescents preferred those 17-21 years older than they and the aged preferred advisors 20-23 years younger. For almost all cases, all subjects preferred male advisors. Middle-aged persons might be sought most for advice because they are perceived as possessing the best combination of practical experience and recent technical knowledge.

Cunningham, W.R. and Birren, J.E., Age changes in human abilities: A 28-year longitudinal study, Developmental Psychology, 1976, 12, 81-82.

Gounard, B.R. and Keitz, S.M., Age differences in adults' free recall of pictures and words, paper presented at Annual Meeting of A.P.A., 1975, ERIC Document Reproduction Service #ED 116 144.

Research with college-age subjects has shown pictorial stimuli are remembered better than verbal stimuli. The past research shows that adults do more poorly on memory and free-recall tasks, but this seems to be because of a failure, not an inability, to do so. In the present study, old and young subjects learned lists of word and picture stimuli in a free recall condition. Overall, pictures were recalled better, and the extent of this superiority was equivalent in both age groups. This suggests that memory processes for visual and verbal modes differ only quantitatively, not qualitatively, with age. Thus, age differences in adult learning and memory seem not to reflect a basic change in underlying storage processes.

Hornblum, J.N., and Overton, W.F., Area and volume conservation among the elderly: Assessment and training, Developmental Psychology, 1976, 12, 68-74.

These authors argue that the poor performance of the aged on Piagetian tasks can be explained by the distinction between competence (the formal, logical representation of structures) and performance (psychological processes by which information is assessed and used). They suggest the deficits reflecting situational or task factors. In the present study, simple verbal feedback led to a significant improvement in performance. The authors surmise that the feedback activated existing operational structures and wasn't merely reinforcing specific responses.

Labouvie-Vief, G. and Gonda, J.N., Cognitive strategy training and intellectual performance in the elderly, Journal of Gerontology, 1976, 31, 327-332.

The authors view reduced intellectual performance in the aged as an experiential deficit reversible by concentrating on training certain component skills. The present study examines the effect of strategy training on intellectual performance and also its generalizability

to other tasks. Subjects were trained for a test in inductive reasoning. The results show that it is possible through training to produce significant increments in intellectual performance by the aged and that these training effects are of a surprisingly broad nature. General practice effects were more prominent than specific training effects, which suggests that the aged may not be deficient in initiating task-relevant behavior after all or that they may be relatively ineffective in utilizing experimenter-imposed strategies. The authors conclude that there may be more plasticity to intelligence in old age than thought.

Lahniers, C.E., Perceptions of aging parents in the context of disengagement theory, Genetic Psychology Monographs, 1975, 92, 299-320.

The author presents the following hypotheses: 1) if the aged do indeed reduce social relations, their children should indicate this in ratings; 2) the aged, with fewer interactions, should be freer from behavioral norms; 3) children should rate parents as increasingly inactive and self-absorbed; 4) the aged have a minority group psychology and are seen by their children as having reduced control over their environment; 5) the aged become more pessimistic; and, 6) the aged become more depressed. The results are generally consistent with the hypotheses, and children see the aged as changing via the disengagement process. However, the generalized disengagement theory was not observed in some subject groups, so disengagement seems not be a necessary consequence of aging after all.

Marshall, V.W., Age and awareness of finitude in development gerontology, Omega, 1975, 6, 113-129.

The author contends that the recognition of mortality is important for the aging. Disengagement theorists criticize activity theory's lack of provision for an awareness of finitude as they say that equating usefulness with steady expansion of life inevitably avoids a discussion of death. The author says that disengagement and life review are functions not of age but rather of awareness of finitude. When an individual is aware that he has outlived all or most siblings, he becomes more aware of his own death; accordingly, those living in old age and retirement housing report a higher awareness of death. It is contended that an important aspect of aging has been missed in gerontological research because age, and not awareness of finitude, has been used as the primary variable. The author also suggests that actual distance from death might account for many developmental changes with age.

Rubin, K.H., Extinction of conservation: A life-span investigation, Developmental Psychology, 1976, 12, 51-56.

There is recent evidence that Piagetian cognitive development may not be unidirectional. The best performance seems to be among young and middle-aged adults while children and the aged perform similarly. The present study found that conservation ability is not resistant to extinctions; that is, conservation is reversible and develops in a curvilinear fashion through life. The author criticizes the position of Hornblum and Overton (1976).

Witte, K.L., Paired-associate learning in young and elderly adults as related to presentation rate, Psychological Bulletin, 1975, 82, 975-985.

This review article mentions that no single variable fully accounts for age differences in learning -- there really does seem to be a slowness disability in the aged besides possible other variables like health, anxiety, and use of mediators. The author suggests examining process variables in future research in paired-associate learning. For example, researchers should see if the age deficit is caused by a rehearsal deficiency or if the low ability to develop mediators results from a lack of practice throughout life or from physiological changes in the central nervous system.

III. INTERVENTION

Fine, M., Interrelationships among mobility, health, and attitudinal variables in an urban elderly population, Human Relations, 1975 28, 451-474.

The author used a demonstration program of low-cost, door-to-door, group taxi service for those over 60 to see what effects the program would have on users. Factor analysis showed that mobility is related to health and functional ability. Functional ability is also highly related to frequency of visits, thus indicating that "disengagement" is more a function of physical inability to get around than anything else. Those with more mobility had higher life satisfaction. Current income was strongly related to life satisfaction. The author suggests that, by increasing mobility, improved transportation may also improve life satisfaction and other attitudes.

IV. EDUCATION

Baltes, P.B. and Labouvie, G.V., Adult development of intellectual performance: Description, explanation, and modification, in C. Eisdorfer and M. Lawton (eds.), The psychology of adult development and aging, Washington, D. C.: A. P. A., 1973.

Recent evidence that cohort differences are largely due to historical change has educational implications. In the past, the environment was relatively stable so there was little danger of an aging individual losing his capacity for intellectual adaptation to rapid cultural progress. Today, cultural change is so rapid that intellectual proficiency of older generations acquired through formal socialization and education may be offset by the young's continuous exposure to more effective and longer training programs. Life-span education can help solve this problem.

Birkhill, W.R. and Schaie, K.W., The effect of differential reinforcement of cautiousness in intellectual performance among the elderly, Journal of Gerontology, 1975, 30, 578-583.

If cautiousness is one of the ability-extraneous variables that hinder the aged's performance on intellectual measures, one would expect those in low-risk conditions to do better than those in high-risk conditions. Results from testing in various conditions confirms that cautiousness may operate the least in low-anxiety, low-risk conditions, but it can also be minimized in high-anxiety, high-risk situations. The results suggest also that the aged may retain an abundance of cognitive resources yet untapped. Fruitful intervention programs are needed.

DeCrow, R., New learning for older Americans: An overview of national effort, Adult Education Assn. of U.S.A., 1974, ERIC #ED 107 928.

This is a long booklet. The author believes that existing programs are best equipped to serve those who already have a good background, while few serve those for whom learning is especially challenging (those over 75, men, the very poor or disabled, minorities). He lists and describes how various agencies can provide formal and informal learning opportunities for the aged. Still needed are new methods suited for the aged, the development of recruitment, counseling and evaluating techniques, staff training, and research, financing, and communications. An annotated bibliography on adult learning is attached.

Dudding, G., The role of the two-year college and the aging. ERIC #ED 118 191.

The author describes a program at Lehigh County Community College. Among the features there is a community-based "satellite" program which consists of films, nutrition programs, creative arts, and a "late start" program to involve the isolated aged in social and volunteer activities.

Eklund, L., Aging and the field of education, in M.W. Riley (ed.) Aging and Society, Vol. II, New York: Russell Sage Foundation, 1969.

Education is implicated in every problem of the aging. This is a particular problem, for in 1960, 70% of those over 65 had no more than an eighth-grade education compared to just 17% of those between 25 and 29. Further, the education of childhood and youth is not sufficient to serve a dynamic lifetime. The success of one's lifelong education, though, is partly contingent on better education when young; thus, an active education with discussions and seminars is needed so that educational technologies become a part of the person.

Galvin, K. et al, Educational and retraining needs of older adults, 1975. ERIC #ED 110 132.

The purpose of the study was to assess retirement needs in the area of vocational education. Many colleges in one area were surveyed. Among the important needs uncovered were: supplemental income and retiring programs to enable part-time employment; pre-retirement assistance programs (especially financial planning, daily coping, health, nutrition, consumer education); and, the importance of post-retirement employment opportunities.

Goodrow, B.A., Limiting factors in reducing participation in older adult learning opportunities, Gerontologist, 1975, 15, 418-422.

In a survey the author found the three greatest limitations to participation were poor eyesight, irregular home responsibilities precluding scheduled classes, and lack of transportation. Men more often offered attitudinal excuses (e.g., too old). To get around the vision problem, educators should emphasize interpersonal communication, small groups, discussion. Educational opportunities should be offered in the immediate neighborhood. Programs should encourage active participation and have a low emphasis on evaluation. Older adults want to self-improve, not necessarily earn credit. Older men especially are reluctant to join a program that is potentially embarrassing or threatening to their self-images.

Hickey, T., Current issues in training and education in gerontology, Penn State, 1975. ERIC #ED 115 728.

The author describes five current models of college gerontology programs: 1) a state-recognized consortium; 2) an interdisciplinary and diffused model (a research-training program based at one university but without a strong core); 3) a center entity (which provides strong research, leadership, and links to university departments); 4) single program orientation (this is linked with certain key individuals and their projects); and, 5) functional program orientation (which is problem-oriented and versatile). The author advocates a functional approach to gerontology education; small colleges, he says, can often serve these purposes well. As for funding, he says that foundations are now interested in applied research with long-term benefits.

Hiemstra, R., The older adult and learning, 1975. ERIC#ED 117 371.

A functional elderly education program is a societal necessity. The present study shows that the aged make more attempts to learn than is generally realized. The commonly cited obstacles to participation are going out at night, lack of time, cost, and home responsibilities. The most desired courses generally deal with finances, health and the law. Among the interesting recommendations the author makes are: 1) Educators, especially in the health field, should find new, non-traditional ways to make learning available and acceptable to the aged; 2) a special effort should be made to reach the aged of those demographic subgroups that lack education the most; 3) the use of TV as an aid should be studied; and, 4) continuing educators should be involved. The author lists many possible research areas, including investigating why learning opportunities decrease with age and why divorced and separated old people spend so much time on vocational/occupational learning projects.

Labouvie-Vief, G. and Gonda, J.N., Cognitive strategy training and intellectual performance in the elderly, Journal of Gerontology, 1976, 31, 327-332.

The authors view reduced intellectual performance in the aged as an experiential deficit reversible by concentrating on training certain component skills. The present study examines the effect of strategy training on intellectual performance and also its generalizability to other tasks. Subjects were trained for a test in inductive reasoning. The results show that it is possible through training to produce significant increments in intellectual performance by the aged and that these training effects are of a surprisingly broad nature. General practice

effects were more prominent than specific training effects, which suggests that the aged may not be deficient in initiating task-relevant behavior after all or that they may be relatively ineffective in utilizing experimenter-imposed strategies. The authors conclude that there may be more plasticity to intelligence in old age than thought.

Lerston, K.C., Some psychological aspects of aging: Implications for teaching and learning, 1974. ERIC # ED 109 093.

The author offers a broad definition of aging: the declining ability of an individual to adapt to environmental demands, especially when the probability of death increases. The aged are commonly inflexible in motor, cognitive, and personal factors, so, in education, perhaps flexibility should be the goal and not performance or quantity. The problem with many memory studies in the past has been that the degree of original learning has not been controlled: paired-associate tests where original learning is controlled shows little difference between the old and others. There is much literature on learning and performance problems, but virtually nothing exists about strategies for teaching the aged.

Peterson, D.A., Life-span education and gerontology, Gerontologist, 1975, 15, 436-441.

Life-span education may be viewed as a planned series of activities undertaken by an individual through life which by increasing knowledge, improving skills, and modifying attitudes, will facilitate adjustments to societal and individual changes affecting a person. Some of the emphases for a program for old people should include vocational preparation and development, leisure time preparation and usage, and attitudes toward aging. Life-span education is useful for career changes and for developing a positive attitude to the aging process.

Sanders, J.C., Sterns, H.L., Smith, M., and Sanders, R.E., Modification of concept identification in older adults, Developmental Psychology, 1975, 11, 824-829.

The present study was designed to demonstrate an improvement in the aged's performance on a relatively difficult concept identification task by using a training procedure promoting the development of a problem-solving capability generalizable beyond the specific problems

used in the training. A programmed learning sequence based on operant principles was used; gradually, irrelevant dimensions of learning were added as the subject learned to ignore irrelevant information. Results show a significant improvement after training and indicate that cognitive deficits can be modified. Further, this study demonstrates the value of an operational framework to develop training procedures.

Spinetta, J.J. and Hickey, T., Aging and higher education: The institutional response, Gerontologist, 1975, 15, 431-435.

Weg, R.B., Educational intervention and gerontology, Gerontologist, 1975, 15, 448-451.

If higher education is the intellectual center of research involved mostly with knowledge building, we know older adults continue to learn. If it is the designer of a better society, formal education through life facilitates adjustment to social and individual changes. Two of four predictors of longevity of life are psychosocial: maintenance of role in society and a positive view of life. Life-long education can help in these regards.

White, S., Hameister, D., and Hickey, T., Community-based training: A model for university and state partnerships, Penn State, 1975, ERIC # ED 115 727.

The authors describe a cooperative program of Penn State University and the Pennsylvania unit on aging. With both parties as equal partners, a more coherent overall program for the aged is possible. For example, the university and state in partnership can establish a ranking system whereby different levels of experiential attainment qualify a person for various level gerontological jobs. For example, a high school education, four short training modules, and three months work might qualify a person to be a geriatric recreational aide. This system can lead to standardization of services.

Woodruff, D.S. and Walsh, D.A., Research in adult learning: The individual, Gerontologist, 1975, 15, 424-430.

Learning is internal while performance is external, and we often measure learning from performance though poor performance could be related to noncognitive factors like poor motivation. This is especially true for the old, who may just not perform well. For instance, in paired-associate learning, the old may just need more time to process new information. They benefit from increased study time even when response is unlimited. There is evidence of overarousal of the autonomic nervous system of the old in learning. This can be overcome by familiarization with the task. Educational material must be relevant to the goals of the old. Old people don't use mediational techniques spontaneously. The data suggest that intelligence does not decline because of the aging process but that the current young outperform the old.

V. WORK AND RETIREMENT

Atchley, R.C., Adjustment to loss of job at retirement, International Journal of Aging and Human Development, 1975, 6, 17-29.

The author offers a synthesis of some theories of aging. He claims activity theory holds for only a few people. Continuity theory, which says that the individual copes with retirement by increasing time spent in familiar roles rather than new ones, may hold for many aged. Disengagement theory also seems reasonable to the author. He suggests the central processes of adjustment are internal compromise and interpersonal negotiations. Different reactions to retirement reflect partly the different capacities of individuals to deal with any change. Each person's hierarchy of personal goals is a big influence (especially the position of one's job in that hierarchy). Through interpersonal negotiations the individual articulates goals, and the world can influence the development and change of the hierarchy. Those with difficulty adjusting to retirement are inflexible in the face of change.

Bell, B.D., The limitations of crisis theory as an explanatory mechanism in social gerontology, International Journal of Aging and Human Development, 1975, 6, 153-168.

Proponents of the crisis theory of aging contend that, since work is the most important way to integrate into society, a great crisis exists for the jobless aged. Others say, however, that, especially for lower SES workers, work is merely a means to earn a living. Nevertheless, it has been contended that the major integrative factor in one's role set, or total set of public behaviors, is occupational involvement. This implies that it is not just the loss of work roles but the threat of the ambiguous state of retirement that is disruptive. Further, this leads to the possibility that retirement will lower life satisfaction and disrupt one's role set. The findings of the present study do show a significant decline in life satisfaction after retirement, but no behavioral disruptions of significance followed the retirement transition and the patterns of role set disruption showed no clear relationship to changes in life satisfaction. Two results directly contradicted crisis theory: work commitment was not critical in a life satisfaction change following retirement, and those with strong commitments wanted re-engagement less.

Galvin, K. et al, Educational and retraining needs of older adults, 1975, ERIC # ED 110 132.

The purpose of the study was to assess retirement needs in the area of vocational education. Many colleges in one area were surveyed. Among the important needs uncovered were: supplemental income and retraining programs to enable part-time employment; pre-retirement assistance programs (especially financial planning, daily coping, health, nutrition, consumer education); and the importance of post-retirement employment opportunities.

Matching job and worker characteristics: Work supplement for the aged, Human Resources Center, 1973. ERIC # ED 114 502.

According to the Secretary of Labor in 1968, one of every two jobs becoming vacant was closed to workers over 55. The population increase combined with less labor force participation leads to increased dependence on pensions and social security for income. The best chance to alleviate this problem, of course, is a healthy economy with many jobs. "Project Senior Abilities" was designed to examine the concept that the needs and talents of older workers can be matched with specific job requirements and the needs of the general economy. Those placed in jobs through the program tended to be male and married. Their job requirements were less demanding: they had previously had lower salaries and were more likely to accept part-time, low-paying jobs. Some trends in the literature pertaining to work for the aged are cited: many work situations produce less strain now; there is increasing pressure for earlier retirements; there are always jobs being "phased out"; retirement may be psychologically unhealthy for some aged; and there is increasing government interest in employment opportunities for the aged.

Peretti, P.O. and Wilson C., Voluntary and involuntary retirement of aged males and their effect on emotional satisfaction, usefulness, self-image, emotional stability, and interpersonal relationships, International Journal of Aging and Human Development, 1975, 6, 131-138.

Evidence suggests that leisure time is best spent when a person is engaged in goal-oriented behaviors. Voluntary retirement has a more positive effect than involuntary retirement. Those who retire voluntarily are more content, satisfied, happier, have more social contacts and friendships, and have more self-confidence and striving. They generally have planned for retirement well in advance. Men retiring involuntarily felt their lives had been disrupted: some did not accept their new status and had negative attitudes of gloom and despair about the future.

Rhee, H.A., Human aging and retirement, International Social Security Association, 1974. ERIC # ED 112 025

The author decries coercive chronological age limits to freedom to work partly because they replace the accustomed rhythm of life with sudden idleness, leading to atrophy because of physical and mental inactivity. Retirement greatly affects one's role: it represents a bigger role change than just an occupational change. The relationship of retirement and playing roles is discussed.

VI. SERVICES

Gutman, G.M. and Herbert, C.P., Mortality rates among relocated extended-care patients, Journal of Gerontology, 1976, 31, 352-357.

Past studies show that the aged die excessively during the first year (in particular the first three months) following relocation of most any kind. The patients in the present study were all acute transferees relocated due to demolition of their building. The results, when compared to death rates of the tested ward over the previous five years, do not support the past research; indeed, the mortality rate here was actually better than some in the past. The authors believe that the degree of environmental change and transfer procedures employed have more effect on mortality than mere relocation.

Kart, C.S. and Manard, B.B., Quality of care in old age institutions, Gerontologist, 1976, 16, 250-256.

Past studies have shown that nursing home residents receive little nursing care. Less than one quarter of all residents received any nursing contact, and only 2% of all observations included nursing attention in one study. The authors find that the better nursing homes tend to be nonprofit, voluntary ones which are small and rich in resources.

Linsk, N., Howe, M.W., and Pinkston, E.M., Behavioral group work in a home for the aged, Social Work, 1975, 20, 454-463.

The success of behavioral approaches to therapy for the aged suggests that more precise techniques be applied to social group work for the aged. In the present study, the social worker tried to intervene to increase group members' participation in activities. The results show a strong relationship between the social worker's task-related questions directed at group members and increased levels of appropriate verbalization. The possible benefits include the aged having more opportunities to become socially engaged, the use of meetings as an improved source of information, the use of meetings as settings to express opinions and get recognition for them. This counteracts the tendency to become isolated and noncommunicative.

Posner, J., Notes on the negative implications of being competent in a home for the aged, International Journal of Aging and Human Development, 1974, 5, 357-364.

Staff and inmates alike pre-define inmates of homes as old, incompetent, and abnormal: the home is a mirror of the outside world, and it is oriented to the least competent. Those viewed as competent and unproblematic are left pretty much alone after admission. The staff's philosophy is not to help unless really needed and to help first those who need it most. Therefore, those who are pretty good have been judged incompetent enough to lose in the outside world but too competent to win on the inside, a sort of Catch 22.

Wiley, M.D., Psychological problems of normal aging: Implications for public library service, 1975, ERIC # ED 111 407.

The author advocates active participation by public libraries in serving the needs of the aged. Examples of existing library programs for the aged are bookmobiles, personal distribution of books, and deposit collections in senior citizen centers. Libraries should seek out projects and books that would interest the aged.

VII. LIVING SITUATIONS

Bengtson, V.L., Dowd, J.J., Smith, D.H., and Inkeles, A., Modernization, modernity, and perceptions of aging: A cross-cultural study, Journal of Gerontology, 1975, 30, 688-695.

See Section I

Bild, B.R. and Havighurst, R.J., Senior citizens in great cities: The case of Chicago, Gerontologist, 1976, 16, (1Pt.2).

This is a special issue of The Gerontologist dealing in depth with the situation of the elderly in Chicago. Their most pervasive problem seems to be crime. A great disparity was found among different groups of the elderly. Topics covered by the chapters in this issue include economic welfare, housing, health, family and social support, life satisfaction, knowledge and use of services, and others.

Carp, F.M., Impact of improved housing on morale and life satisfaction, Gerontologist, 1975, 15, 511-515.

The author hypothesizes that an improved living environment would improve life satisfaction in general. She tested people immediately and eight years after a move to a particular improved setting. The increased satisfaction with housing was associated with a lasting drop in overall problem awareness. Although both experimental and control groups reported that they were just "living from day to day" after eight years, the residents were more secure about the future.

Lawton, M.P., The relative impact of congregate and traditional housing on elderly tenants, Gerontologist, 1976, 16, 237-242.

Congregate housing offers a minimum service package including some on-site meals in a common dining room and one or more of the services of nursing, housekeeping, and personal care. Results of the present analysis offer some support for hypotheses that congregate housing lowers behavioral competence and elevates affective competence.

"Passive contentment" is associated with congregate housing while "active strain" is associated with traditional housing. Suggestions made include: 1) give potential applicants a wide choice in the amount of service desired, and 2) locate near enough to neighborhood resources for the semi-independent and fully mobile to walk.

Wolk, S. and Telleen, S., Psychological and social correlates of life satisfaction as a function of residential constraint, Journal of Gerontology, 1976, 31, 89-98.

The purpose of the present study was to investigate what parameters of environmental setting influence life satisfaction. The two settings examined here were a sectarian retirement home with rigid schedules and a retirement-type village which encourages an independent existence with no specific rules about activities. A greater degree of life satisfaction was found in the low-constraint setting. The level of social-psychological constraint in the environment highly influences the most important correlates of life satisfaction, like perceived autonomy, self-acceptance, activity level, and developmental task accomplishment.